## 718642

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1. Lewis 10-10-14

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Savoy East Association, Inc.

Name of Corporation

Please return all correspondence concerning this matter to the following:

DOCUMENT NUMBER:

718642

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Patrick J. Murphy, Esq.

Name of Contact Person

Law Offices of Patrick J. Murphy & Associates, P.A.

Firm/Company

650 East Hillsboro Boulevard

Address

Deerfield Beach, FL 33441

City/State and Zip Code

pmurphy@murphys-law.cc

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick J. Murphy, Esq.

,,954

525-5509

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	e is submitted	tions 607.0502, 617.050 for a corporation orga gistered office or regis	nized under the laws	of the State of	
1. The name of the	corporation:	Savoy East Asso	ociation, Inc.		
2. The principal of	• –	3210 Southeast	10th Street		
		Pompano Beach	, FL 33062		
3. The mailing add	ress (if differe	nt):		····	· · · · · · · · · · · · · · · · · · ·
4. Date of incorpor	ation/qualifica	o6/05/1970	Document nur	nber: 718642	
		f the current registered f resigned, enter resign		office on file with the	
Т	homas M.	Wich			
2	2701 NE 1	4th Street Cause	way, Suite 3		<u> -</u> 모
<u>_</u> F	ompano [	Beach, FL 33062	2		130 <b>4</b> 1
6. The name and st (if changed):	reet address o	f the new registered age	ent (if changed) and /	or registered office	shirt of the correction of the
		Patrick J. Mu	ırphy & Associa	ites , P.A.,	N NES
_6	650 East H	lillsboro Bouleva			93 TEM
ſ	Deerfield F	Р.О. Вох NO Beach, FL 33441	•		
			<u></u>	<u> </u>	
The street address as changed will be	of its register e identical.	ed office and the street	address of the busin	ess office of its regist	ered agent,
Such change was a authorized by the	authorized by board, of the c	resolution duly adopte corporation has been no	d by its board of dire otified in writing of t	ectors or by an officer he change.	so
I Must Signature of	of an officer or direct	ctor	ROBERT SI	La NA Haw PRE	SIDENT
I hereby accept the I further agree to performance of my agent. Or) if this of hereby confirm the	e appointment comply with the duties, and I document is by at the corpora	as registered agent an ne provisions of all sta am familiar with and eing filed merely to ref tion has been notified			zistered ess, I
Signati	and of Registered A	gent	9/29//	Date	
If signing on beha	lf of an entity:	_			
PATRICK Type	J. M. d or Printed Name	inphy			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*